

MILLENNIUM CHARTER ACADEMY

Admissions Application (Step 2 of 2)



STUDENT INFORMATION

Name:		
last	first	middle
Parents or Legal Guardian:		Telephone:
		Telephone:
Ethnicity (circle one): Hispanic/Latino	Non-Hispanic/Latino	
Race (circle one): American Indian/Alasl	kan Native Asian Black Nat	ive Hawaiian/Pacific Islander White
Has your child ever been retained?	If yes, w	nat grade(s)?
Does your child have an Individualized E	ducation Plan (IEP)? □yes □	lno <u>or</u> a Section 504 Plan? □yes □no
Does your child receive services in speech	h/language, OT, PT, or for othe	r health concerns? □yes □no
If so, what?		
EDUCATIONAL INFORMATION Why do you think MCA would be a good		
special attention in any area?		Oo you think your child may excel or need
Millennium Charter Academy is committed by the parents' involvement in the educate experience into this process through your	ional process. We invite you to	
MCA is dedicated to the overall growth o and/or physically, so that we might better		nild academically, socially, emotionally,

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AUTHORIZATION FOR RELEASE OF RECORDS to Millennium Charter Academy (for students entering $1^{st} - 12^{th}$ grades)

Name of Student			erred Name
Date of Birth	Present Grade		
Street, City, State, Zip			
Parent's Name			
Student Resides With:			County
Previous School:			Grades Attended:
School Address, City, State	, Zip:		
Telephone:	Fax:		_
Previous School:			Grades Attended:
School Address, City, State	, Zip:		
Telephone:	Fax:		
Dear Sir or Ma'am, As parent and/or legal guard	dian of(first, mide	lle, and last names)	
I hereby authorize you to re	lease my child from your school. I	Furthermore I authorize Mille	ennium Charter Academy to
obtain all records from regular Transcript	lar education and from special edu	cation, including ☑ IEP/504 Inform	mation
✓ Grades✓ Test Scores		✓ Cumulative Fil	
✓ Fest scores ✓ Health and Medic	al Records	✓ Disciplinary H✓ Exceptional Ch	
Attendance Record	ds	Other	
☑ Psychological Record	cords		
I testify that all the information permission to request recon	ation submitted herein is accurate and tru ds from previous schools.	ıthful. Furthermore, I grant Milleı	nnium Charter Academy
			Date
	Signature of Parent/ Legal Gua	rdian	



MISSION, VISION, AND HONOR CODE

We are a philosophically and mission driven school, devoted to making a difference in education, and our high expectations are matched by our love and concern for your child. Please read the statements below to better understand our commitment to you, as well as your family's obligation to the school.

STUDENT HONOR CODE

As an individual with endowed worth and value, I will honor others with the same respect that I am due. I will uphold the high ideals of this institution with integrity by being trustworthy, responsible, and loving.

PARENT HONOR CODE

As a parent of a Millennium Charter Academy student, I understand the school's high level of academic rigor and expectations of moral character, and I agree:

- ✓ To uphold and adhere to the school's established values, policies, procedures, and expectations
- ✓ To partner with the Academy in its efforts to assist me in my responsibility to educate my child
- ✓ To hold my child to the Academy's Honor Code at and away from school
- ✓ To foster in my child the expectations of being respectful, honest, compassionate, responsible, and courageous
- ✓ To nightly check homework, to read notes from the teacher, to help my child stay organized and ready for what lies ahead, to discuss books, field trips and the experiences of the day, and to counsel and exhort my child regarding peer relationships, schoolwork, and homework
- ✓ To ensure that my child wears clothing within the limits of the established dress code
- ✓ To provide transportation to and from school in a timely manner

OUR MISSION

Millennium Charter Academy is an independent, public school whose classroom is the community, which invites parents, teachers, students, and the community to collectively challenge each child to achieve superior academic standards and to develop the highest moral character. We expand educational choice with an innovative, student-centered environment producing life-long learners equipped with the knowledge and critical-thinking skills necessary to become leaders in the 21st Century.

OUR VISION

As a natural advancement of our stated Mission and Goals, Millennium Charter Academy will develop citizens of virtuous character who think well and, as leaders, contribute to our communities, our nation, and the world. Our students will understand that a good citizen rules and is ruled; is independent, yet simultaneously in relation with others; and, is grounded in an honest search for knowable, universal truth, goodness, and beauty. To foster this model of citizenship, we will maintain our delivery of a robust, liberal arts curriculum, deepen our implementation of classical education, and continue our principle-based discipline grounded in love for the individual and respect for the corporate good, as well as a belief in redemption and growth. Through these means, we will increase our attention to developing the following characteristics of citizenship in our students: 1) an awareness of themselves as members of a community, from local to national to global; 2) a devotion to intellectual and moral integrity, including an ability to fashion credible ideas and to argue logically; 3) a respect for the rule of law; and 4) an appreciation of American constitutional democracy.

DISCLAIMER

Millennium Charter Academy is an independent, public school, charging no tuition and open to all. MCA does not discriminate on the basis of race, color, national origin, sex, or religious affiliation.

☐ I have read, understand, and agr☐ I have completed the Release ar	ree to uphold the Mission and Vision statements, and the Pend Authorization Part 1 (Part 2, if pertinent) and the Home Admissions and Enrollment Process on page six.	arent Honor Code.
I testify that I have read the informa accurate and truthful.	tion required by this application, and that all the information	on submitted herein is
	Signature of Parent/ Legal Guardian	Date



$M\ i\ l\ l\ e\ n\ n\ i\ u\ m\quad C\ h\ a\ r\ t\ e\ r\quad A\ c\ a\ d\ e\ m\ y$

Home Language Survey

As required by public law 100-297, which helps ensure the most appropriate education for all children, please complete this form and return it to the office or to your child's teacher.

Child's Name			
	Last (apellido)	first (nombre)	middle (inicial)
Grade (grado actual)	Gender (género)	Today's date (fec	ha)
Current School (escuela	actual)	Date of Birth (fec	ha de nacimiento)
Country of Birth (lugar	de nacimiento)		
	y U.S. school, whether prive icula en escuela de los EE.UU)		dergarten
	ge your child learned to spea que aprendió a hablar su hijo o		
What language does you ¿Cuál idioma habla su hij	ur child speak most often? _ o o hija con más frecuencia?		
What language is most of Cuál idioma se habla má	often spoken at home?s en casa?		
	es in school, please list any o estudios de idiomas en una escr		
Thank you for your help).		
	For O	ffice Use —	
If any of the above ques forward it to our ESL te	ations have a language other acher.	than English listed, make a	copy of the original and
Reviewed by ESL Teac	her		Date
First/Home Language _			
Administer the English	language proficiency screen	er? □yes □no	



Millennium Charter Academy Parental Permissions Form

Student's Name	Grade	Teacher
Field Trips I give permission for my child to atte My child has permission to be transp policy requires that I be notified prior	orted by van, bus or private vel r to any field trip that my child	nicle. I understand that the school may take.
Parent/Guardian Signature		Date
Parent/Guardian Signature		
	raphed image or videoed image but not limited to newslett	age, including voice, to be used in ters, videos, newspapers, yearbook, own remote learners.
		Date
Parent/Guardian Signature		
Effective Date of Permission Please check one box:		
☐ I understand that this parenta student at Millennium Charte		ctive for as long as my child is a
This form shall be effective for the beginning and end	for a specific time period, from ling dates).	to
		Date
Parent/Guardian Signature		
Internet Permission Form I grant my child permission to use the Academy.	e Internet as a learning resource	e as prescribed by Millennium Charter
		Date
Parent/Guardian Signature		



Millennium Charter Academy Parental Request for Individual Diabetes Care Plan

Student's Name	Grade	Birth Date
Address		
City	State	Zip
Parent/ Guardian		Phone
This form must be returned to scho North Carolina's mandate. If this i Applicable" and sign the form.	•	*
I hereby request that an Individual child. I authorize the institution list the health care provider listed below reviewed by a health care provider my child receiving medical service Services (911) at school. This plan change.	ted above to secure any related hw. I understand that I must provi and appropriately trained staff ws, other than self care, parent can	nealth care information from ide a Diabetes Care Plan will need to be in place prior to re, and Emergency Medical
Current Physician or Health Care P	Provider	
Address		
City		
Phone		
		Date

Parent/Guardian Signature



Millennium Charter Academy Information Sheet

Year	-	

At Millennium Charter Academy, your child's safety is of paramount importance. The information you list below will provide us with information about your child, and help us contact you, or the people you appoint, in the event of an emergency. Your e-mail address is requested so we may e-mail you about school events and happenings. MCA does not share your personal information with others.

Student	Date of Birth
Student's Address	
City/State/Zip	
Resides With	MCA Teacher/Grade Level
MCA Sibling(s) and Grade Level(s)	
Parent/Guardian	Parent/Guardian
Home Phone	Home Phone
Email Address	Email Address
Workplace	Workplace
Work Phone	Work Phone
Other Phone	Other Phone
Emergency Contacts Relationship Home Pho 1 2 3	
Any Known Allergies or Head Injuries or Concussions:	

Please notify office personnel immediately of any changes to student information.



REQUIRED OF ALL STUDENTS NEW TO NC PUBLIC SCHOOLS.



January 2016rev

NORTH CAROLINA HEALTH ASSESSMENT TRANSMITTAL FORM This form and the information on this form will be maintained on file in the school attended by the student named herein and is confidential and not a public record. (Approved by North Carolina Department of Public Instruction and Department of Health and Human Services) PARENT to COMPLETE THIS SECTION Student Name: (Middle) (Last) (First) Birthdate (M/D/YYYY): School Name: Home Address: City: State: County: Parent Information: Name of Parent, Guardian, or person standing in Telephone(s) loco parentis: Home: Work: Cell Phone: Health Concerns to be shared with authorized persons (school administrators, teachers, and other school personnel who require such information to perform their assigned duties): HEALTH CARE PROVIDER TO COMPLETE THIS SECTION Medications prescribed for student: Student's allergies, type, and response required: Special diet instructions: Health-related recommendations to enhance the student's school performance: Vision screening information: Passed vision screening: Yes No Concerns related to student's vision:







January 2016rev

Hearing screening information: Passed hearing screening: Yes No Concerns related to student's hearing:					
Recommendations, concerns, or needs rel	lated to student's h	nealth and req	uired school follow-up:		
School follow-up needed: ☐ Yes ☐ No					
Medical Provider Comments:					
Please attach other applicable school hea	lth forms:				
Immunization record attached: School medication authorization form attached: Diabetes care plan attached: Asthma action plan attached: Health care plans for other conditions attached:					
Health Care Professional's Certification I certify that I performed, on the student named above, a health assessment in accordance with G.S. 130A-440(b) that included a medical history and physical examination with screening for vision and hearing, and if appropriate, testing for anemia and tuberculosis. I certify that the information on this form is accurate and complete to the best of my knowledge.					
Name:	Name: Title:				
Signature:			Date (m/d/yyyy):		
			Date of Exam (if Differ	rent):	
Practice/Clinic Name:			Practice/Clinic Address:		
Practice/Clinic City:	State:	Zip:	Phone:	Fax:	
Provider Stamp Here:					





ADMISSIONS AND ENROLLMENT PROCESS



ENROLLMENT PERIOD

MCA has open enrollment throughout the year, except March 1 through the end of the school year, for any student whose primary residence is in North Carolina.

PREFERENTIAL ENROLLMENT

MCA gives enrollment preference to siblings of students enrolled the previous year, board and employee's children (not to exceed 15% of the student body), and siblings of students that completed the highest grade offered by MCA and were enrolled at least four years (legacy preference). MCA defines siblings as biological siblings, stepsiblings, half-siblings, and children residing in a family foster home.

ADMISSIONS APPLICATION, KINDERGARTEN¹ (ADMISSIONS APPLICATION STEP 1 OF 2)

To enroll in kindergarten a child must be five years of age on or before August 31 of that school year. The Academy receives applications for the rising kindergarten on or after August 1, one school year in advance of desired enrollment. If the applications do not exceed Academy or grade level capacity by February 20, then all students who have submitted applications by that deadline will be accepted for admission and no lottery will be held. If the total number of applications received exceeds the established capacity of the Academy or grade level for the upcoming year by 3:30pm on February 20 (the lottery eligibility deadline), then a fair, impartial, public lottery will be held the following day, February 21 (or the first business day thereafter). If multiple birth siblings are applying for admission, MCA will enter one surname into the lottery to represent all of the multiple birth siblings. If that surname is drawn, then all multiple birth siblings are admitted. If a lottery is held, those students not accepted by the lottery will be placed on a priority waiting list in the order drawn. Siblings of currently enrolled students receive admission priority and typically do not participate in the lottery but must submit an application prior to the lottery deadline. After February 20, additional students will be accepted on a first-come, first-served basis until the capacity is realized.

ADMISSIONS APPLICATION, GRADE 1 AND HIGHER¹

MCA accepts applications throughout the year for first grade and all older grades. In accordance with state regulations, MCA gives preference to siblings "of currently enrolled students who were admitted in a previous year." For MCA, "siblings" includes any of the following who reside in the same household: biological siblings, half siblings, stepsiblings, and foster children. Should a waiting list be necessary, applicants are placed in order of application date.

NOTIFICATION, ALL GRADE LEVELS²

Once a seat is available the Academy notifies the student's parents, at which point the parents have three business days to inform the school whether or not they would like to enroll. If they choose to enroll, a date for a transition assessment is set. If they decide not to continue or fail to respond, the name is removed, and the student must reapply for future consideration.

ENROLLMENT³ (ADMISSIONS APPLICATION STEP 2 OF 2)

After parents decide to enroll their child, they complete the Admissions Application Step 2 of 2, which provides both the school and the family with important information. During this time the Academy communicates to the parents its expectations and its commitments.

ASSESSMENTS4

Students accepted by lottery will be given a date and time for a school readiness assessment, usually in April. Students in first grade and higher are given a date and time for a placement assessment. These assessments help inform parents and the school of the student's projected academic transition and potential needs.

PLACEMENT⁵

After the discussing the results of the transition assessment, the Academy places the student in the appropriate grade level.

